

UNITED STATES BANKRUPTCY COURT
FOR THE EASTERN DISTRICT OF VIRGINIA
NEWPORT NEWS DIVISION

In Re: James Thomas Hunter
Barbara Savage Hunter
Debtors

Case No. 11-51870-FJS

Chapter 13

NOTICE OF PRO SE CREDITOR/CLAIMANT MOTION TO RETURN UNCLAIMED FUNDS

James Thomas Hunter claimant and debtor ("Claimant") in the above referenced case has filed a PRO SE CREDITOR/CLAIMANT MOTION FOR RETURN OF UNCLAIMED FUNDS.

Your rights may be affected. You should read these papers carefully and discuss them with your attorney, if you have one in this Bankruptcy case. (If you do not have an attorney, you may wish to consult one).

If you do not wish the Court to grant relief sought in the motions, or if you want the Court to consider your views on the motions, then on or about 21 days from the date of this motion, you or your attorney must:

File with the Court a written response with supporting memorandum as required by Local Bankruptcy Rule 9013-1(H). You must also mail a copy to:

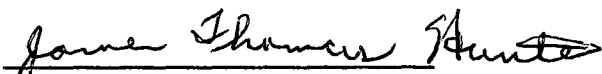
US Bankruptcy Court
Attn: Clerk of Court
600 Granby Street, Room 400
Norfolk, VA 23510-1915

Unless a written response and supporting memorandum are filed and served by the date specified, the Court may deem any opposition waived, treat the motion as conceded, and issue an order granted the requested relief without further notice or hearing. You must also mail a copy to the persons listed below.

U.S. Trustee
200 Granby Street, Suite 625
Norfolk, VA 23510

U.S. Attorney
721 Lakefront Commons, Suite 300
Newport News, VA 23606

Date: 1-19-22


James Thomas Hunter, Claimant
1677 Tinsley Blvd
Prince George, VA 23875
(804) 352-5404

UNITED STATES BANKRUPTCY COURT
FOR THE EASTERN DISTRICT OF VIRGINIA
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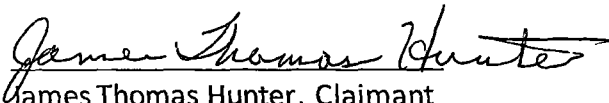
CERTIFICATE OF SERVICE

I HEREBY CERTIFY that on this _____ day of _____, 2022, a copy of the foregoing PRO SE CREDITOR/CLAIMANT MOTION FOR RETURN OF UNCLAIMED FUNDS was served by the first-class mail, postage pre-paid to:

U.S. Trustee
200 Granby Street, Suite 625
Norfolk, VA 23510

Date: 1-25-22

U.S. Attorney
721 Lakefront Commons, Suite 300
Newport News, VA 23606


James Thomas Hunter, Claimant
1677 Tinsley Blvd
Prince George, VA 23875
(804) 352-5404

UNITED STATES BANKRUPTCY COURT
FOR THE EASTERN DISTRICT OF VIRGINIA
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In Re: James Thomas Hunter
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Case No. 11-51870-FJS

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PRO SE CREDITOR/CLAIMANT MOTION FOR RETURN OF UNCLAIMED FUNDS

COMES NOW, Pro Se Creditor/Claimant James Thomas Hunter in the above-captioned case, per local rule 3011-1 Unclaimed funds, moves in writing and in the form of a motion filed with the Court, to petition the Court for the return of \$879.22, which is the sum of all monies being held in the U.S. Treasury of this court as unclaimed funds, which are due to Claimant. A dividend check in the amount of \$879.22 was not negotiated by the Claimant and the Trustee, pursuant to 11 U.S.C. Section 347 (a), delivered the unclaimed funds to the Clerk, US Bankruptcy Court.

The claimant did not receive the dividend check in the above case for the following reasons:

Dividends were not collected by the claimant because he moved and was unaware of the unclaimed funds.

The claim has never been assigned to the creditor.

The pro se claimant believes that no other party may be entitled to the funds.

Furthermore, Claimant now seeks to recover funds from the Court's Registry. Claimant's current address is 1677 Tinsley Blvd, Prince George, VA 23875 and Claimant humbly asks that the check be made payable to:

James Thomas Hunter, Claimant
1677 Tinsley Blvd
Prince George, VA 23875

Wherefore, Claimant prays, that upon proper notice to the U.S. Attorney's office, the court orders a check in the amount of \$879.22 made payable to James Thomas Hunter.

Date: 1-19-22



James Thomas Hunter, Claimant
1677 Tinsley Blvd
Prince George, VA 23875
(804) 352-5404

SUBSCRIBED AND SWORN TO BEFORE ME this 19 day of January, 2022, in the
County of Petersburg, State of Virginia.


Signature of Notary Public

Date Commission Expires: 02/28/2023

MICHAEL STONE
NOTARY PUBLIC
REG. #7503231
COMMONWEALTH OF VIRGINIA
MY COMMISSION EXPIRES FEBRUARY 28, 2023

UNITED STATES BANKRUPTCY COURT
FOR THE EASTERN DISTRICT OF VIRGINIA
NEWPORT NEWS DIVISION

In Re: James Thomas Hunter
Barbara Savage Hunter
Debtors

Case No. 11-51870-FJS

Chapter 13

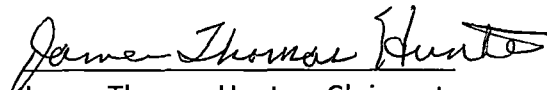
CERTIFICATE OF SERVICE

I HEREBY CERTIFY that on this _____ day of _____, 2022, a copy of the foregoing PRO SE CREDITOR/CLAIMANT MOTION FOR RETURN OF UNCLAIMED FUNDS was served by the first-class mail, postage pre-paid to:

U.S. Trustee
200 Granby Street, Suite 625
Norfolk, VA 23510

Date: 1-25-22

U.S. Attorney
721 Lakefront Commons, Suite 300
Newport News, VA 23606


James Thomas Hunter, Claimant
1677 Tinsley Blvd
Prince George, VA 23875
(804) 352-5404

**UNITED STATES BANKRUPTCY COURT
FOR THE EASTERN DISTRICT OF VIRGINIA
NEWPORT NEWS DIVISION**

**In Re: James Thomas Hunter
Barbara Savage Hunter
Debtors**

Case No. 11-51870-FJS

Chapter 13

ORDER FOR RETURN OF UNCLAIMED FUNDS

A PRO SE CREDITOR/CLAIMANT MOTION FOR RETURN OF UNCLAIMED FUNDS having been filed pursuant to Local Bankruptcy Rule 3011-1, said motion having been served on the United States Trustee and the United States Attorney for the Eastern District of Virginia and there being no objections filed; it is

ORDERED that the unclaimed funds in the amount of \$879.22 currently on deposit with the Treasury of the United States, be returned to:

**James Thomas Hunter
1677 Tinsley Blvd
Prince George, VA 23875**

Let the Clerk give notice of entry of this order to the debtor(s), attorney for debtor(s), movant, attorney for movant, if applicable, trustee and the United States Trustee.

Date: _____

United States Bankruptcy Judge

**NOTICE OF JUDGMENT OR ORDER
ENTERED ON DOCKET:**

CLERK
U.S. BANKRUPTCY COURT
NORFOLK DIVISION

Date:

U.S. Bankruptcy Court
Attn: Clerk of Court
600 Granby Street, Room 400
Norfolk, VA 23510-1915

2022 JAN 31 P 1:27

RE: James Thomas Hunter
Ch 13, Case no. 11-51870-FJS
Unclaimed Funds

FILED

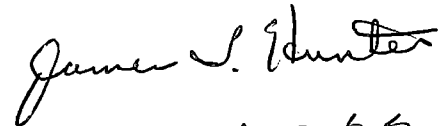
Dear Sir or Madam:

My name is James Thomas Hunter and I am the claimant for the above-mentioned matter. My wife, Barbara Savage Hunter, the joint-creditor is deceased. I am providing a copy of her death certificate with the following for processing:

- o Notice of Pro Se Creditor/Claimant Motion To Return Unclaimed Funds
- o Certificate of Service for Unclaimed Funds
- o Pro Se Creditor/Claimant Motion for Return of Unclaimed Funds
- o Certificate of Service for Unclaimed Funds
- o Order for Return of Unclaimed Funds
- o Copy of my Driver's License
- o Copy of my deceased wife (Joint-Creditor's) Death Certificate
- o Report of Deposit of Unclaimed Funds
- o Certification Under Local Bankruptcy Rule 2090-1

A copy of the W-9 was sent via USPS to the Financial Administrator. Please review this Motion and let me know if you need anything further.

Regards,



James Thomas Hunter
(804) 352-5404

1-55-22

cc: U.S. Trustee
U.S. Attorney

03-22-2013

04:36 PM

FRX24 PUBLIC FRX SERVICE

Document

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PAGE 02

COMMONWEALTH OF VIRGINIA - CERTIFICATE OF DEATH
DEPARTMENT OF HEALTH - DIVISION OF VITAL RECORDS - RICHMOND

COPY A

FOR DIVISION OF
VITAL RECORDS

REGISTRATION AREA NUMBER 216	CERTIFICATE NUMBER 61	STATE FILE NUMBER
1. FULL NAME OF DECEDENT Barbara A. Hunter		2. SEX <input type="checkbox"/> male <input checked="" type="checkbox"/> female
3. DATE OF DEATH 1-7-2013	4. AGE 67	5. DATE OF BIRTH 4-15-1946
7. NAME OF HOSPITAL OR INSTITUTION OF DEATH (if none, so state) Riverside Reg Med Center		8. COUNTY OF DEATH (if independent city, leave blank)
9. CITY OR TOWN OF DEATH Newport News		10. STREET ADDRESS OR RT. NO. OF PLACE OF DEATH 500 J. Clyde Morris Blvd
11. STATE (OR FOREIGN COUNTRY) OF DECEDENT'S RESIDENCE Virginia		12. COUNTY OF DECEDENT'S RESIDENCE (if independent city, leave blank)
13. CITY OR TOWN OF RESIDENCE Newport News		14. STREET ADDRESS OR RT. NO. OF RESIDENCE 9413 Mason Ave
15. NAME OF DECEDENT'S FATHER Grant Savage		16. MAIDEN NAME OF DECEDENT'S MOTHER Helen Williams
17. RACE OF DECEDENT Black		18. EDUCATION (Specify only highest grade completed) Elementary/Secondary (0-12) _____ College (13-16) _____
19. CITIZEN OF WHAT COUNTRY USA		20. BIRTHPLACE (State of country) Virginia
21. NEVER MARRIED <input type="checkbox"/> DIVORCED <input type="checkbox"/> MARRIED <input checked="" type="checkbox"/> WIDOWED <input type="checkbox"/>		22. IF MARRIED OR WIDOWED, NAME OF SPOUSE James Hunter
23. SOCIAL SECURITY NUMBER 231586622		24. USUAL OR LAST OCCUPATION nurse-LPN health care
25. KIND OF BUSINESS OR INDUSTRY		26. INFORMANT - OR SOURCE OF INFORMATION - RELATIONSHIP James Hunter-husband
27. PART I. Enter the diseases, injuries, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. List only one cause on each line. Sepsis		
28. IMMEDIATE CAUSE (Final disease or condition resulting in death) (A) DUE TO (OR AS A CONSEQUENCE OF) (B) DUE TO (OR AS A CONSEQUENCE OF) (C) DUE TO (OR AS A CONSEQUENCE OF)		
29. PART II. Other significant conditions contributing to death but not resulting in the underlying cause given in Part I. ESRD wound infection		
30. 28b. IF FEMALE, WAS THERE A PREGNANCY IN PAST 3 MONTHS? YES <input type="checkbox"/> NO <input type="checkbox"/> UNKNOWN <input type="checkbox"/>		
31. 28c. IF EXTERNAL CAUSE, IT WAS PRIMARY <input type="checkbox"/> OR CONTRIBUTING TO CAUSE OF DEATH <input type="checkbox"/>		
32. 28d. DESCRIBE HOW INJURY RELATING TO DEATH OCCURRED		
33. 28e. TIME OF INJURY (mo.) (day) (year) (A.M. P.M.)		
34. 28f. INJURY OCCURRED (A) WHILE AT WORK <input type="checkbox"/> (B) NOT WHILE AT WORK <input type="checkbox"/>		
35. 28g. PLACE OF INJURY (home, farm, factory, street, other (specify))		
36. 28h. (city or town) (county) (state)		
37. To the best of my knowledge, death occurred at (A) HOME (B) PLACE OF DEATH (C) PLACE OF INJURY (D) PLACE OF DEATH (E) PLACE OF INJURY (F) PLACE OF DEATH (G) PLACE OF INJURY (H) PLACE OF DEATH (I) PLACE OF INJURY (J) PLACE OF DEATH (K) PLACE OF INJURY (L) PLACE OF DEATH (M) PLACE OF INJURY (N) PLACE OF DEATH (O) PLACE OF INJURY (P) PLACE OF DEATH (Q) PLACE OF INJURY (R) PLACE OF DEATH (S) PLACE OF INJURY (T) PLACE OF DEATH (U) PLACE OF INJURY (V) PLACE OF DEATH (W) PLACE OF INJURY (X) PLACE OF DEATH (Y) PLACE OF INJURY (Z) PLACE OF DEATH (AA) PLACE OF INJURY (AB) PLACE OF DEATH (AC) PLACE OF INJURY (AD) PLACE OF DEATH (AE) PLACE OF INJURY (AF) PLACE OF DEATH (AG) PLACE OF INJURY (AH) PLACE OF DEATH (AI) PLACE OF INJURY (AJ) PLACE OF DEATH (AK) PLACE OF INJURY (AL) PLACE OF DEATH (AM) PLACE OF INJURY (AN) PLACE OF DEATH (AO) PLACE OF INJURY (AP) PLACE OF DEATH (AQ) PLACE OF INJURY (AR) PLACE OF DEATH (AS) PLACE OF INJURY (AT) PLACE OF DEATH (AU) PLACE OF INJURY (AV) PLACE OF DEATH (AW) PLACE OF INJURY (AX) PLACE OF DEATH (AY) PLACE OF INJURY (AZ) PLACE OF DEATH (BA) PLACE OF INJURY (BB) PLACE OF DEATH (BC) PLACE OF INJURY (BD) PLACE OF DEATH (BE) PLACE OF INJURY (BF) PLACE OF DEATH (BG) PLACE OF INJURY (BH) PLACE OF DEATH (BI) PLACE OF INJURY (BJ) PLACE OF DEATH (BK) PLACE OF INJURY (BL) PLACE OF DEATH (BM) PLACE OF INJURY (BN) PLACE OF DEATH (BO) PLACE OF INJURY (BP) PLACE OF DEATH (BQ) PLACE OF INJURY (BR) PLACE OF DEATH (BS) PLACE OF INJURY (BT) PLACE OF DEATH (BU) PLACE OF INJURY (BV) PLACE OF DEATH (BW) PLACE OF INJURY (BX) PLACE OF DEATH (BY) PLACE OF INJURY (BZ) PLACE OF DEATH (CA) PLACE OF INJURY (CB) PLACE OF DEATH (CC) PLACE OF INJURY (CD) PLACE OF DEATH (CE) PLACE OF INJURY (CF) PLACE OF DEATH (CG) PLACE OF INJURY (CH) PLACE OF DEATH (CI) PLACE OF INJURY (CJ) PLACE OF DEATH (CK) PLACE OF INJURY (CL) PLACE OF DEATH (CM) PLACE OF INJURY (CN) PLACE OF DEATH (CO) PLACE OF INJURY (CP) PLACE OF DEATH (CQ) PLACE OF INJURY (CR) PLACE OF DEATH (CS) PLACE OF INJURY (CT) PLACE OF DEATH (CU) PLACE OF INJURY (CV) PLACE OF DEATH (CW) PLACE OF INJURY (CX) PLACE OF DEATH (CY) PLACE OF INJURY (CZ) PLACE OF DEATH (DA) PLACE OF INJURY (DB) PLACE OF DEATH (DC) PLACE OF INJURY (DD) PLACE OF DEATH (DE) PLACE OF INJURY (DF) PLACE OF DEATH (DG) PLACE OF INJURY (DH) PLACE OF DEATH (DI) PLACE OF INJURY (DJ) PLACE OF DEATH (DK) PLACE OF INJURY (DL) PLACE OF DEATH (DM) PLACE OF INJURY (DN) PLACE OF DEATH (DO) PLACE OF INJURY (DP) PLACE OF DEATH (DQ) PLACE OF INJURY (DR) PLACE OF DEATH (DS) PLACE OF INJURY (DT) PLACE OF DEATH (DU) PLACE OF INJURY (DV) PLACE OF DEATH (DW) PLACE OF INJURY (DX) PLACE OF DEATH (DY) PLACE OF INJURY (DZ) PLACE OF DEATH (EA) PLACE OF INJURY (EB) PLACE OF DEATH (EC) PLACE OF INJURY (ED) PLACE OF DEATH (EE) PLACE OF INJURY (EF) PLACE OF DEATH (EG) PLACE OF INJURY (EH) PLACE OF DEATH (EI) PLACE OF INJURY (EJ) PLACE OF DEATH (EK) PLACE OF INJURY (EL) PLACE OF DEATH (EM) PLACE OF INJURY (EN) PLACE OF DEATH (EO) PLACE OF INJURY (EP) PLACE OF 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PLACE OF DEATH (IK) PLACE OF INJURY (IL) PLACE OF DEATH (IM) PLACE OF INJURY (IN) PLACE OF DEATH (IO) PLACE OF INJURY (IP) PLACE OF DEATH (IQ) PLACE OF INJURY (IR) PLACE OF DEATH (IS) PLACE OF INJURY (IT) PLACE OF DEATH (IU) PLACE OF INJURY (IV) PLACE OF DEATH (IW) PLACE OF INJURY (IX) PLACE OF DEATH (IY) PLACE OF INJURY (IZ) PLACE OF DEATH (JA) PLACE OF INJURY (JB) PLACE OF DEATH (JC) PLACE OF INJURY (JD) PLACE OF DEATH (JE) PLACE OF INJURY (JF) PLACE OF DEATH (JG) PLACE OF INJURY (JH) PLACE OF DEATH (JI) PLACE OF INJURY (JJ) PLACE OF DEATH (JK) PLACE OF INJURY (JL) PLACE OF DEATH (JM) PLACE OF INJURY (JN) PLACE OF DEATH (JO) PLACE OF INJURY (JP) PLACE OF DEATH (JQ) PLACE OF INJURY (JR) PLACE OF DEATH (JS) PLACE OF INJURY (JT) PLACE OF DEATH (JU) PLACE OF INJURY (JV) PLACE OF DEATH (JW) PLACE OF INJURY (JX) PLACE OF DEATH (JY) PLACE OF INJURY (JZ) PLACE OF DEATH (KA) PLACE OF INJURY (KB) PLACE OF DEATH (KC) PLACE OF INJURY (KD) PLACE OF DEATH (KE) PLACE OF INJURY (KF) PLACE OF DEATH (KG) PLACE OF INJURY (KH) PLACE OF DEATH (KI) PLACE OF INJURY (KJ) PLACE OF DEATH (KK) PLACE OF INJURY (KL) PLACE OF DEATH (KM) PLACE OF INJURY (KN) PLACE OF DEATH (KO) PLACE OF INJURY (KP) PLACE OF DEATH (KQ) PLACE OF INJURY (KR) PLACE OF DEATH (KS) PLACE OF INJURY (KT) PLACE OF DEATH (KU) PLACE OF INJURY (KV) PLACE OF DEATH (KW) PLACE OF INJURY (KX) PLACE OF DEATH (KY) PLACE OF INJURY (KZ) PLACE OF DEATH (LA) PLACE OF INJURY (LB) PLACE OF DEATH (LC) PLACE OF INJURY (LD) PLACE OF DEATH (LE) PLACE OF INJURY (LF) PLACE OF DEATH (LG) PLACE OF INJURY (LH) PLACE OF DEATH (LI) PLACE OF INJURY (LJ) PLACE OF DEATH (LK) PLACE OF INJURY (LL) PLACE OF DEATH (LM) PLACE OF INJURY (LN) PLACE OF DEATH (LO) PLACE OF INJURY (LP) PLACE OF DEATH (LQ) PLACE OF INJURY (LR) PLACE OF DEATH (LS) PLACE OF INJURY (LT) PLACE OF DEATH (LU) PLACE OF INJURY (LV) PLACE OF DEATH (LW) PLACE OF INJURY (LX) PLACE OF DEATH (LY) PLACE OF INJURY (LZ) PLACE OF DEATH (MA) PLACE OF INJURY (MB) PLACE OF DEATH (MC) PLACE OF 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PLACE OF DEATH (OA) PLACE OF INJURY (OB) PLACE OF DEATH (OC) PLACE OF INJURY (OD) PLACE OF DEATH (OE) PLACE OF INJURY (OF) PLACE OF DEATH (OG) PLACE OF INJURY (OH) PLACE OF DEATH (OI) PLACE OF INJURY (OJ) PLACE OF DEATH (OK) PLACE OF INJURY (OL) PLACE OF DEATH (OM) PLACE OF INJURY (ON) PLACE OF DEATH (OO) PLACE OF INJURY (OP) PLACE OF DEATH (OQ) PLACE OF INJURY (OR) PLACE OF DEATH (OS) PLACE OF INJURY (OT) PLACE OF DEATH (OU) PLACE OF INJURY (OV) PLACE OF DEATH (OW) PLACE OF INJURY (OX) PLACE OF DEATH (OY) PLACE OF INJURY (OZ) PLACE OF DEATH (PA) PLACE OF INJURY (PB) PLACE OF DEATH (PC) PLACE OF INJURY (PD) PLACE OF DEATH (PE) PLACE OF INJURY (PF) PLACE OF DEATH (PG) PLACE OF INJURY (PH) PLACE OF DEATH (PI) PLACE OF INJURY (PJ) PLACE OF DEATH (PK) PLACE OF INJURY (PL) PLACE OF DEATH (PM) PLACE OF INJURY (PN) PLACE OF DEATH (PO) PLACE OF INJURY (PP) PLACE OF DEATH (PQ) PLACE OF INJURY (PR) PLACE OF DEATH (PS) PLACE OF INJURY (PT) PLACE OF DEATH (PU) PLACE OF INJURY (PV) PLACE OF DEATH (PW) PLACE OF INJURY (PX) PLACE OF DEATH (PY) PLACE OF INJURY (PZ) PLACE OF DEATH (QA) PLACE OF INJURY (QB) PLACE OF DEATH (QC) PLACE OF INJURY (QD) PLACE OF DEATH (QE) PLACE OF INJURY (QF) PLACE OF DEATH (QG) PLACE OF INJURY (QH) PLACE OF DEATH (QI) PLACE OF INJURY (QJ) PLACE OF DEATH (QK) PLACE OF INJURY (QL) PLACE OF DEATH (QM) PLACE OF INJURY (QN) PLACE OF DEATH (QO) PLACE OF INJURY (QP) PLACE OF DEATH (QQ) PLACE OF INJURY (QR) PLACE OF DEATH (QS) PLACE OF INJURY (QT) PLACE OF DEATH (QU) PLACE OF INJURY (QV) PLACE OF DEATH (QW) PLACE OF INJURY (QX) PLACE OF DEATH (QY) PLACE OF INJURY (QZ) PLACE OF DEATH (RA) PLACE OF INJURY (RB) PLACE OF DEATH (RC) PLACE OF INJURY (RD) PLACE OF DEATH (RE) PLACE OF INJURY (RF) PLACE OF DEATH (RG) PLACE OF INJURY (RH) PLACE OF DEATH (RI) PLACE OF INJURY (RJ) PLACE OF DEATH (RK) PLACE OF INJURY (RL) PLACE OF DEATH (RM) PLACE OF INJURY (RN) PLACE OF DEATH (RO) PLACE OF INJURY (RP) PLACE OF DEATH (RQ) PLACE OF INJURY (RR) PLACE OF DEATH (RS) PLACE OF INJURY (RT) PLACE OF DEATH (RU) PLACE OF INJURY (RV) PLACE OF DEATH (RW) PLACE OF INJURY (RX) PLACE OF DEATH (RY) PLACE OF INJURY (RZ) PLACE OF DEATH (SA) PLACE OF INJURY (SB) PLACE OF DEATH (SC) PLACE OF INJURY (SD) PLACE OF DEATH (SE) PLACE OF INJURY (SF) PLACE OF DEATH (SG) PLACE OF INJURY (SH) PLACE OF DEATH (SI) PLACE OF INJURY (SJ) PLACE OF DEATH (SK) PLACE OF INJURY (SL) PLACE OF DEATH (SM) PLACE OF INJURY (SN) PLACE OF DEATH (SO) PLACE OF INJURY (SP) PLACE OF DEATH (SQ) PLACE OF INJURY (SR) PLACE OF DEATH (SS) PLACE OF INJURY (ST) PLACE OF DEATH (SU) PLACE OF INJURY (SV) PLACE OF DEATH (SW) PLACE OF INJURY (SX) PLACE OF DEATH (SY) PLACE OF INJURY (SZ) PLACE OF DEATH (TA) PLACE OF INJURY (TB) PLACE OF DEATH (TC) PLACE OF INJURY (TD) PLACE OF DEATH (TE) PLACE OF INJURY (TF) PLACE OF DEATH (TG) PLACE OF INJURY (TH) PLACE OF DEATH (TI) PLACE OF INJURY (TJ) PLACE OF DEATH (TK) PLACE OF INJURY (TL) PLACE OF DEATH (TM) PLACE OF INJURY (TN) PLACE OF DEATH (TO) PLACE OF INJURY (TP) PLACE OF DEATH (TQ) PLACE OF INJURY (TR) PLACE OF DEATH (TS) PLACE OF INJURY (TT) PLACE OF DEATH (TU) PLACE OF INJURY (TV) PLACE OF DEATH (TW) PLACE OF INJURY (TX) PLACE OF DEATH (TY) PLACE OF INJURY (TZ) PLACE OF DEATH (UA) PLACE OF INJURY (UB) PLACE OF DEATH (UC) PLACE OF INJURY (UD) PLACE OF DEATH (UE) PLACE OF INJURY (UF) PLACE OF DEATH (UG) PLACE OF INJURY (UH) PLACE OF DEATH (UI) PLACE OF INJURY (UJ) PLACE OF DEATH (UK) PLACE OF INJURY (UL) PLACE OF DEATH (UM) PLACE OF INJURY (UN) PLACE OF DEATH (UO) PLACE OF INJURY (UP) PLACE OF DEATH (UQ) PLACE OF INJURY (UR) PLACE OF DEATH (US) PLACE OF INJURY (UT) PLACE OF DEATH (UU) PLACE OF INJURY (UV) PLACE OF DEATH (UW) PLACE OF INJURY (UX) PLACE OF DEATH (UY) PLACE OF INJURY (UZ) PLACE OF DEATH (VA) PLACE OF INJURY (VB) PLACE OF DEATH (VC) PLACE OF INJURY (VD) PLACE OF DEATH (VE) PLACE OF INJURY (VF) PLACE OF DEATH (VG) PLACE OF INJURY (VH) PLACE OF DEATH (VI) PLACE OF INJURY (VJ) PLACE OF DEATH (VK) PLACE OF INJURY (VL) PLACE OF DEATH 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CERTIFIED COPY OF DEATH RECORD

This is to verify that this is a true and correct reproduction of the original record filed with the Newport News Health Department, Newport News, Virginia.

[Signature]
DEPUTY REGISTRAR

JAN 22 2013

DATE ISSUED

(SEAL)

**IN THE UNITED STATES BANKRUPTCY COURT
FOR THE EASTERN DISTRICT OF VIRGINIA
Newport News Division**

In re: JAMES THOMAS HUNTER
BARBARA SAVAGE HUNTER

Chapter 13
Case No.: 11-51870-FJS

Debtors

REPORT OF DEPOSIT OF UNCLAIMED FUNDS

Pursuant to Federal Rule of Bankruptcy Procedure 3011 and 11 U.S.C. 347 the Trustee herein submits a check payable to "Clerk, United States Bankruptcy Court" representing unclaimed funds to be deposited by the Clerk of Court into the Treasury of the United States. Said funds are subject to withdrawal as provided by 28 U.S.C. 2042 and shall not escheat under any state law. The unclaimed funds represent the dividend(s) due and payable to:

(Debtor(s) or Creditor(s) name and address)	(Amount of dividend)
JAMES THOMAS HUNTER BARBARA SAVAGE HUNTER 9413 MACON AVE. NEWPORT NEWS, VA 23601	\$879.22

Date: July 11, 2016

/s/ Michael P. Cotter

Michael P. Cotter
Chapter 13 Standing Trustee
870 Greenbrier Circle, Suite 402
Chesapeake, VA 23320
(757) 961-3000